

Information Required to Determine Commitment

If not enough information about the four risk factors for dangerousness is presented to the board, members have a duty to discover any elements related to dangerousness by questioning the individual before them, the mental health professional, and any legal representatives.

Questions about (1) the precipitating event that brought about the petition for a hearing, (2) the person's behavior and (3) past history will aid in determining dangerousness. A label of "dangerous" or "violent" applied to a person should not be accepted at face value, but must rest on a report of the incident and behavior. These facts must always be ascertained:

1. **WHAT:** The events, the person's behavior, diagnosis, presence or absence of mental illness or substance use
2. **WHO:** Identity of the victim(s). Research has shown that the mentally ill are most likely to commit violence on family members; if the victim is a stranger there is a higher risk
3. **WHEN:** Date, time, and importantly—frequency
4. **WHERE:** Circumstances as well as place
5. **WHY:** Attempt to determine what triggered the violence; was it in retaliation for an imagined or real event; what was the motivation behind the behavior (Note that a predatory or cold and calculated violent act is more often lethal than one arising from an emotional trigger of the moment)
6. **HOW:** Determine if there is a pattern by inquiring about past behavior, as discovering a pattern helps make a prediction

Research can't predict violence, but it has found elements statistically related to likelihood of violence. Answers to the following questions may help a mental health board in determining risk.

1. MENTAL STATUS: Was the person psychotic or intoxicated?
2. MOTIVATION: Was this a predatory or calculated and planned act, or was the affective acting out from emotional impulse?

3. EMOTION: What were the person's feelings before, during and after the event? Does the person express remorse for the act? (Fear and anger are most commonly associated with violent or aggressive acts; lack of remorse or lack of empathy for the victim is more dangerous)
4. IMPULSE: Has the person demonstrated unpredictable and impulsive behavior in the past? Over-controlled behavior? (Over-controlled behavior can also result in danger when long repressed emotions erupt suddenly, triggered by the proverbial "straw that broke the camel's back".)
5. VICTIM(S): Was the victim familiar and known or was the act perpetrated against a stranger?
6. WEAPONS: Related to the element of magnitude—was a weapon used? What weapon and what magnitude of harm either resulted or could have resulted? For example, was a plate thrown at the wall in anger or was a gun used?
7. STRESSORS: What were the biological or medical stressors affecting the person? Were there increased psychological or social stressors affecting their lives such as a lost job, broken relationship, recently diagnosed medical condition? (These would be listed on Axis IV of the DSM diagnosis)